2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000000825

Entity Name: HDR SECURITY OPERATIONS, INC.

FILED Apr 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 315 E ROBINSON ST 315 E ROBINSON ST ORLANDO, FL 32801 SUITE 400 ORLANDO, FL 32801 **Current Mailing Address:** New Mailing Address: 8404 INDIAN HILLS DRIVE OMAHA, NE 681144098 FEI Number: 41-2036409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BELL, RICHARD R Name: Name: 8404 INDIAN HILLS DRIVE Address: Address: City-St-Zip: OMAHA, NE 681144098 City-St-Zip: DEVP Title: Title: () Delete () Change () Addition Name: VENSAS, RICHARD J Name: 555 N. CARANCAHUA STE 1650 Address: Address: CORPUS CHRISTI, TX 78478 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition PACHMAN, LOUIS J Name: Name: 8404 INDIAN HILLS DRIVE Address: Address: City-St-Zip: OMAHA, NE 681144098 City-St-Zip: Title: () Delete Title: () Change () Addition LACEY, WENDY L Name: Name: Address: 8404 INDIAN HILLS DRIVE Address: City-St-Zip: OMAHA, NE 681144098 City-St-Zip: Title: Title: () Delete () Change () Addition BACHMAN, MERLE S Name: Name: 8404 INDIAN HILLS DR. Address: Address: City-St-Zip: OMAHA, NE 68114 City-St-Zip: Title: () Delete Title: () Change () Addition LITTLE, GEORGE A Name: Name: 8404 INDIAN HILLS DRIVE Address: Address: City-St-Zip: City-St-Zip: OMAHA, NE 681144098

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WENDY L LACEY T 04/18/2009